# Application Data Sheet APPLICATION INFORMATION

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	,
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks:	
Number of Copies of CDs::	
Sequence Submission?::	
Computer Readable Form (CRF)?:: No	
Number of Copies of CRF::	
Title::	Extensible and Dynamically-Configurable Problem-
	Reporting Client
Attorney Docket Number::	223508
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	2
Total Drawing Sheets::	11
Small Entity?::	No
Latin Name::	
Variety denomination name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	

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#### APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Paul

Middle Name:: Harold

Family Name:: Donnelly

Name Suffix::

City of Residence:: Newcastle

State or Prov. of Residence:: Washington

Country of Residence:: US

Street of mailing address:: 17152 SE 100th Street

City of mailing address:: Newcastle

State or Province of mailing address:: Washington

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98059

Inventor Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Douglas

Middle Name:: A.

Family Name:: Anderson

Name Suffix::

City of Residence:: Kirkland

State or Prov. of Residence:: Washington

Country of Residence:: US

Street of mailing address:: 11809 NE 138th

City of mailing address:: Kirkland

State or Province of mailing address:: WA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98034

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### **CORRESPONDENCE INFORMATION**

Correspondence Customer Number::

38887

Phone::

(312) 616-5600

Fax::

(312) 616-5700

E-mail Address::

mail@leydig.com

## REPRESENTATIVE INFORMATION

Representative Customer Number:: 38887

Representative Designation::

Registration Number::

Representative Name::

#### **DOMESTIC PRIORITY INFORMATION**

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

#### FOREIGN APPLICATION INFORMATION

Country::

Application Number:: Filing Date::

**Priority Claimed** 

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# **ASSIGNEE INFORMATION**

Assignee name::

**Microsoft Corporation** 

Street of mailing address:: One Microsoft Way

City of mailing address::

Redmond

State or Province of

mailing address::

Washington

Country of mailing

address::

US

Postal or Zip Code of

mailing address::

98052

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